FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response. . . 16.00



	UNIFORMI EMMIED OFFERING EXEM	06041599
Name of Offering (check if this is an a Offering of Series D Preferred Stock	mendment and name has changed, and indicate ch	
Filing Under (Check box(es) that apply:)	☐ Rule 504 ☐ Rule 505 ☒ Rule 50	06 ☐ Section 4(6) ☐ ULOE
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about	the issuer	
Name of Issuer (check if this is an ame	endment and name has changed, and indicate chan	ge.)
RICHFX LTD.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
c/o RichFX, Inc., 512 7th Avenue, 16th Flo	oor New York NY 10018	(646) 274-7300
Address of Principal Business Operations		Telephone Number (Including Area Code)
(if different from Executive Offices)		PROCESSE
Brief Description of Business		D JUL 25 2006
Software Company		
Type of Business Organization		THOMSON
区 corporation	☐ limited partnership, already formed	□ other (please specify) ANCIAL
☐ business trust	☐ limited partnership, to be formed	
	n or Organization: Month Year	
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering or 15 U.S.C. 77d(6).	ng of securities in reliance on an exemption under Regu	solution D or Section 4(6), 17 CFR 230.501 et seq.
Securities and Exchange Commission (SEC)	er than 15 days after the first sale of securities in the of on the earlier of the date it is received by the SEC are date it was mailed by United States registered or cert	at the address given below or, if received at that
When to Eiler H.C. Securities and Evaluation	Commission 450 Figh Street N.W. Washington D.C.	3 20540

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



A BASIC DENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Johann Butting
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o RichFX, Inc., 512 7th Avenue, 16th Floor, New York, NY 10018
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Yuvall Almog
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Coral Ventures, 60 South Sixth Street, Ste 3510, Minneapolis, MN 55402
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Buck Goldstein.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Kenan Institute of Private Enterprise, Kenan Ctr., CB Box 3440, Chapel Hills, NC 27599-3440
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Martin Plaehn
Business or Residence Address (Number and Street, City, State, Zip Code)
2601 Elliott Avenue, Seattle, WA 98121
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Nachemia Perez
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Pitango Ventures, 11 Hamenofim St., Building B, Herzliya 4675 Israel
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Roni Giladi
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o RichFX, Inc., 512 7th Avenue, 16th Floor, New York, NY 10018
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Tracy Tomasso
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o RichFx, Inc., 512 7th Avenue, 16th Floor, New York, NY 10018 (Use blank sheet, or copy and use additional copies of this sheet, as necessary)
(Use blank sheet, or conviand use additional conies of this sheet, as necessary)

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 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Check Box(es) that Apply:	Each general and managing partner of partnership issuers.
Christophe Cremault Business or Residence Address (Number and Street, City, State, Zip Code) c/o RichFX, Inc., 512 7th Avenue, 16th Floor, New York, NY 10018 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Stephen Frieder Business or Residence Address (Number and Street, City, State, Zip Code) c/o RichFX, Inc., 512 7th Avenue, 16th Floor, New York, NY 10018 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Meir Pinhasov Business or Residence Address (Number and Street, City, State, Zip Code) c/o RichFX, Inc., 512 7th Avenue, 16th Floor, New York, NY 10018 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Stephen Smith Business or Residence Address (Number and Street, City, State, Zip Code) c/o RichFX, Inc., 512 7th Avenue, 16th Floor, New York, NY 10018 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)	` ' 11 '
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c/o RichFX, Inc., 512 7th Avenue, 16th Floor, New York, NY 10018 Executive Officer □ Director □ General and/or Managing Partner Full Name (Last name first, if individual) Stephen Frieder Business or Residence Address (Number and Street, City, State, Zip Code) Code RichFX, Inc., 512 7th Avenue, 16th Floor, New York, NY 10018 Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Beneficial Owner □ Director □ General and/or Managing Partner Full Name (Last name first, if individual) Meir Pinhasov Business or Residence Address (Number and Street, City, State, Zip Code) Code RichFX, Inc., 512 7th Avenue, 16th Floor, New York, NY 10018 Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Beneficial Owner □ Executive Officer □ Director □ General and/or Managing Partner Full Name (Last name first, if individual) Street, City, State, Zip Code) Stephen Smith Business or Residence Address (Number and Street, City, State, Zip Code) c/o RichFX, Inc., 512 7th Avenue, 16th Floor, New York, NY 10018 Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Executive Officer □ Director □ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Executive Officer □ Director □ General and/or Managing Partner Full Name (Last nam	Christophe Cremault
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Check Box(es) that Apply:	
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply:	
Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply:	Managing Partner
Check Box(es) that Apply:	Full Name (Last name first, if individual)
Check Box(es) that Apply:	
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual)	Business or Residence Address (Number and Street, City, State, Zip Code)
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual)	
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Full Name (Last name first, if individual)	Business or Residence Address (Number and Street, City, State, Zip Code)
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	Full Name (Last name first, if individual)
	Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

		7.46			B. IN	FORMA	TION AB	OUT OFF	ERING.			ue e	
1.	Has the	issuer sol	d, or does					d investors n 2, if filin				***************************************	Yes No
2.	What is	the minir	num inves	tment that	will be ac	cepted from	m any indi	vidual?	************	•••••		\$	<u>N/A</u>
3.	Does th	e offering	permit joi	int owners	hip of a si	ngle unit?.	**************	***************************************		•••••	***********		Yes No ☑
4.	similar an asso or deal informa	remunera ciated per er. If mo ation for the	tion for so son or age ore than finat that broker	licitation on the of a brown of a brown or dealer of the order of the	of purchase ker or dea sons to be	ers in conr der registe	nection wi red with th	th sales of ne SEC and	securities Vor with a	in the offe state or st	ring. If a ates, list th	y, any com- person to the name of you may se	oe listed is the broker
Ful	l Name (Last name	first, if in	dividual)									
	one	D :1	4 1 1	<u> </u>	10:	O' O'	7' 6	CS.					
Bus	siness or	Residence	e Address	(Number a	ind Street,	City, State	e, Zip Cod	le)					
Nat	me of As	sociated I	Broker or I	Dealer							······································		
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Ful	l Name	(Last name	e first, if ir	ndividual)									
Bu	siness or	Residenc	e Address	(Number	and Street,	City, Stat	e, Zip Coo	ie)					
Na	me of A	ssociated l	Broker or I	Dealer									
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Ful	ll Name	(Last nam	e first, if i	ndividual)			_						
Bu	siness or	Residenc	e Address	(Number	and Street	, City, Stat	te, Zip Coo	de)					
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Sta	tes in W	hich Pers	on Listed l	Has Solicit	ed or Inte	nds to Soli	cit Purcha	sers					
	•	"All State	s" or chec		-			• • • • • • • • • • • • • • • • • • • •					Il States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amou already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering check this box and indicate in the columns below the amount of securities offered for exchange and already exchanged.	g,	
	·	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt		
	Equity	.\$ <u>2,200,000</u>	\$ <u>1,992,464</u>
	□ Common ☐ Preferred		
	Convertible Securities (including warrants)(warrants accompany Series D Preferred)		
	Partnership Interests		
	Other (Specify:)		
	Total	\$ <u>2,200,000</u>	\$ <u>1,992,464</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in the offering and the aggregate dollar amounts of their purchases. For offerings under Rule 50 indicate the number of persons who have purchased securities and the aggregate dollar amount their purchases on the total lines. Enter "0" if answer is "none" or "zero.")4,	Aggregate
		Number	Dollar Amount
		Investors	of Purchases
	Accredited Investors	22	\$ <u>1,992,464</u>
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		. \$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) mon prior to the first sale of securities in this offering. Classify securities by type listed in Part Question 1.	ths	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A	···	
	Rule 504		
	Total		
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of the issuance and conformation may be given as subject to future contingencies. If the amount of an expendit is not known, furnish an estimate and check the box to the left of the estimate.	er.	
	Transfer Agent's Fees	🗆	\$0
	Printing and Engraving Costs		\$ 0
	Legal Fees		\$ 60,000
	Accounting Fees		\$ 0
	Engineering Fees		\$0
	Sales Commissions (specify finders' fees separately)		\$ 0
	Other Expenses (identify)		\$_0
	Total		\$ 60,000

 b. Enter the difference between the aggregate offering price given in response to Part C - Question 4.a. This difference is the the "adjusted gross proceeds to the issuer."	\$ <u>2,140,000</u>				
		Payments to Officers, Directors, & Affiliates	Payments to Others		
Salaries and fees		\$ <u>400,000</u>			
Purchase of real estate			E \$ 0		
Purchase, rental or leasing and installation of machinery and equipment					
Construction or leasing of plant buildings and facilities	×	\$0	S \$ 0		
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger	Del	ድ ለ	≥ \$ 0		
Repayment of indebtedness			× \$ 0		
Working capital					
Other (specify):		. —			
Column Totals Total Payments Listed (column totals added)		\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
	•••••				
D. FEDERAL SIGNATURE		State of the state			
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities request of its staff, the information furnished by the issuer to any non-accredited investor pursual	If this and Exc	notice is filed change Comm	l under Rule 505, the nission, upon written		
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities request of its staff, the information furnished by the issuer to any non-accredited investor pursual Issuer (Print or Type) Signature Signature	If this and Exc	notice is filed change Comm agraph (b)(2)	d under Rule 505, the mission, upon written of Rule 502.		
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